

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Midwest Values PAC

ADDRESS (number and street)

P.O. Box 583232

☐Check if different
than previously
reported. (ACC)

Minneapolis

MN

55458

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00416131

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☒

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

1 1

2 3

2 0 1 0

through

1 2

3 1

2 0 1 0

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Thomas Borman

Signature of Treasurer

Electronically Filed by Thomas Borman

Date

0 1

3 1

2 0 1 1

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name
Midwest Values PAC

Report Covering the Period:

From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	51703.56
(b) Cash on Hand at Beginning of Reporting Period	204587.77	
(c) Total Receipts (from Line 19)	32448.16	1219963.39
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	237035.93	1271666.95
7. Total Disbursements (from Line 31)	58987.80	1093618.82
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	178048.13	178048.13
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Midwest Values PAC

Report Covering the Period:

From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	3970.00	451429.00
(ii) Unitemized	8459.22	670491.06
(iii) TOTAL (add Lines 11(a)(i) and (ii)	12429.22	1121920.06
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	10000.00	48750.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	22429.22	1170670.06
12. Transfers From Affiliated/Other Party Committees	6000.00	38500.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	4017.45	5785.42
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1.49	7.91
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	32448.16	1219963.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	32448.16	1219963.39

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	47392.80	747608.82	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	47392.80	747608.82	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	280500.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	95.00	6510.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	1500.00	1500.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	1595.00	8010.00	
29. Other Disbursements.....	0.00	57500.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	58987.80	1093618.82	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	58987.80	1093618.82	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	22429.22	1170670.06
34. Total Contribution Refunds (from Line 28(d))	1595.00	8010.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20834.22	1162660.06
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	47392.80	747608.82
37. Offsets to Operating Expenditures (from Line 15, page 3)	4017.45	5785.42
38. Net Operating Expenditures (subtract Line 37 from Line 36)	43375.35	741823.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

Patricia S Apperson

Mailing Address 9425 N 81st St

City

Scottsdale

State

AZ

Zip Code

85258

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Unemployed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 1 0

Transaction ID: C4713557

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Cathy Bergen

Mailing Address 13358 Hughes Ct

City

Apple Valley

State

MN

Zip Code

55124-9599

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fairview Ridges Clinic

Occupation

Medical Records Coder

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: C4713632

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Gary Clark

Mailing Address 7021 Perry Creek Rd

City

Somerset

State

CA

Zip Code

95684-9529

FEC ID number of contributing
federal political committee.

C

Name of Employer
Connecting Waters Charter
School

Occupation

IT Director For Charter School

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 6 / 2 0 1 0

Transaction ID: C4712035

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

70.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

Gary Clark

Mailing Address 7021 Perry Creek Rd

City

Somerset

State

CA

Zip Code

95684-9529

FEC ID number of contributing
federal political committee.

C

Name of Employer
Connecting Waters Charter
School

Occupation

IT Director For Charter School

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 1 7 / 2 0 1 0

Transaction ID: C4713621

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

John Coffey

Mailing Address 3 Plateau Cir E

City

Bronxville

State

NY

Zip Code

10708

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Attorney

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 1 7 / 2 0 1 0

Transaction ID: C4710768

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

Jill Donovan Maio

Mailing Address 2818 Glazier Way

City

Ann Arbor

State

MI

Zip Code

48105

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Artist

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 1 6 / 2 0 1 0

Transaction ID: C4713777

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

2750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

Maryann Gregory

Mailing Address 1445 North State Parkway
#1401

City State Zip Code
Chicago IL 60610-1558

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 7 / 2 0 1 0

Transaction ID: C4713647

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

David Grothey

Mailing Address 1869 Scenic View PI

City State Zip Code
Alpine CA 91901-3947

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 7 / 2 0 1 0

Transaction ID: C4713619

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

David Grothey

Mailing Address 1869 Scenic View PI

City State Zip Code
Alpine CA 91901-3947

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: C4713618

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

70.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

Tami Halcomb

Mailing Address 15503 Pescado Cir

City

Austin

State

TX

Zip Code

78734

FEC ID number of contributing
federal political committee.

C

Name of Employer
WPP/Kantar

Occupation

Software Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 1 0

Transaction ID: C4709646

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Janice Hall

Mailing Address 2186 Fairhaven Cir NE

City

Atlanta

State

GA

Zip Code

30305-4367

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 1 0

Transaction ID: C4713574

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Donna R Johnson

Mailing Address 7616 Currell Blvd

City

St Paul

State

MN

Zip Code

55125-2296

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 7 / 2 0 1 0

Transaction ID: C4713677

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

Thomas Johnston

Mailing Address 4690 Pioneer Rd

City

Medford

State

OR

Zip Code

97501-9685

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 1 0

Transaction ID: C4713560

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Richard H Jonk

Mailing Address PO Box 480

City

Somerset

State

WI

Zip Code

54025

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 1 / 2 0 1 0

Transaction ID: C4713519

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Joan Klipping

Mailing Address PO Box 61522

City

Denver

State

CO

Zip Code

80206

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cheyex

Occupation
Designer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 2 / 2 0 1 0

Transaction ID: C4711754

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

Gordon Minette

Mailing Address 80 8th Ave
Ste 312City State Zip Code
New York NY 10011FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-EmployedOccupation
Producer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 1 7 / 2 0 1 0

Transaction ID: C4713666

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Lee Salisbury

Mailing Address 2690 Northridge Ln N

City State Zip Code
Stillwater MN 55082-1500FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
 1 1 / 2 6 / 2 0 1 0

Transaction ID: C4712050

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Lee Salisbury

Mailing Address 2690 Northridge Ln N

City State Zip Code
Stillwater MN 55082-1500FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 2 4 / 2 0 1 0

Transaction ID: C4713636

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

Ann Ward Spaeth

Mailing Address 15 Laughlin Ln

City

Philadelphia

State

PA

Zip Code

19118-3614

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 1 0

Transaction ID: C4713590

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Fern Thornton

Mailing Address 1606 Highland Dr

City

Brownwood

State

TX

Zip Code

76801-6516

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 7 / 2 0 1 0

Transaction ID: C4713642

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Cecelia Walsh

Mailing Address 11 Girard Ave

City

West Long Branch

State

NJ

Zip Code

07764-1220

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Executive Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 6 / 2 0 1 0

Transaction ID: C4712062

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 36

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

Carol Whitney

Mailing Address 865 Clubhouse Dr

City

Ballwin

State

MO

Zip Code

63011-2855

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	0	/	2	0	1	0

Transaction ID: C4713564

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Carol Whitney

Mailing Address 865 Clubhouse Dr

City

Ballwin

State

MO

Zip Code

63011-2855

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	1	0

Transaction ID: C4713639

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Dianne P Wilker

Mailing Address PO Box 679

City

West Redding

State

CT

Zip Code

06896

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	9	/	2	0	1	0

Transaction ID: C4713756

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

3970.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 36

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)
CARPENTERS LEGISLATIVE IMPROVEMENT COMMITTEE UNITE

Mailing Address 101 Constitution Ave NW
10th Floor

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee. **C** C00001016

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: C4712880

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
ECHOSTAR CORPORATION AND DISH NETWORK CORPORATION

Mailing Address 1110 Vermont Ave NW
Ste 750

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee. **C** C00330647

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 2 / 2 0 1 0

Transaction ID: C4711755

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

10000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 36

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

FRANKEN MVPS

Mailing Address PO BOX 583144

City

MINNEAPOLIS

State

MN

Zip Code

55458

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

39064.80

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: C4393888

Amount of Each Receipt this Period

6000.00

B.

Full Name (Last, First, Middle Initial)

Brad Hall

Mailing Address c/o Avery & Greig, LLP
2811 Wilshire Blvd., Ste 700

City

Santa Monica

State

CA

Zip Code

90403

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Producer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 1 0

Transaction ID: C4458791

Amount of Each Receipt this Period

2000.00

[MEMO ITEM]

*

C.

Full Name (Last, First, Middle Initial)

Julia Hall

Mailing Address c/o Avery & Greig, LLP
2811 Wilshire Blvd., Ste 700

City

Santa Monica

State

CA

Zip Code

90403-4804

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Actress

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 1 0

Transaction ID: C4458799

Amount of Each Receipt this Period

2000.00

[MEMO ITEM]

*

SUBTOTAL of Receipts This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 36

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

Donna Kahan

Mailing Address 1100 W Lake Shore Dr
32B

City State Zip Code
Chicago IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
JUF

Occupation
Fundraiser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 1 / 2 0 1 0

Transaction ID: C4393910

Amount of Each Receipt this Period

250.00

[MEMO ITEM]

*

B.

Full Name (Last, First, Middle Initial)

Jeffrey F Kahan

Mailing Address 574 Woodlawn Ave

City State Zip Code
Glencoe IL 60022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Colliers Bennett & Kahnwe-
iler Inc

Occupation
Executive Vice President, Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 2 / 2 0 1 0

Transaction ID: C4393925

Amount of Each Receipt this Period

5000.00

[MEMO ITEM]

*

C.

Full Name (Last, First, Middle Initial)

Richard Melcher

Mailing Address 333 N Michigan Ave
Ste 606

City State Zip Code
Chicago IL 60601

FEC ID number of contributing
federal political committee.

C

Name of Employer
Melcher and Tucker Consul-
tants

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 1 / 2 0 1 0

Transaction ID: C4393903

Amount of Each Receipt this Period

500.00

[MEMO ITEM]

*

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

6000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 36

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

Mal Warwick and Associates

Mailing Address 2550 Ninth Street, Ste. 103

City

Berkeley

State

CA

Zip Code

94710

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

4017.45

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: C4713340

Amount of Each Receipt this Period

4017.45

Refund

SUBTOTAL of Receipts This Page (optional)

4017.45

TOTAL This Period (last page this line number only)

4017.45

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

A.J. Goodman Consulting

Mailing Address 444 Brickell Ave #51-470

City State Zip Code
Miami FL 33131

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D292271

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5162.15

B.

Full Name (Last, First, Middle Initial)

A.J. Goodman Consulting

Mailing Address 444 Brickell Ave #51-470

City State Zip Code
Miami FL 33131

Purpose of Disbursement
Consulting - Fundraising

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D292272

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6000.00

C.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 53582

City State Zip Code
Phoenix AZ 85072

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D292274

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.95

SUBTOTAL of Disbursements This Page (optional)

11167.10

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 53582	Transaction ID: D292275 Date of Disbursement <div> <div>12</div> <div>06</div> <div>2010</div> </div>
City Phoenix State AZ Zip Code 85072 Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>23.89</div>
B. Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 53582 City Phoenix State AZ Zip Code 85072 Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D292252 Date of Disbursement <div> <div>12</div> <div>01</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>4.95</div>
C. Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 53582 City Phoenix State AZ Zip Code 85072 Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D292253 Date of Disbursement <div> <div>12</div> <div>13</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>49.46</div>

SUBTOTAL of Disbursements This Page (optional)

78.30

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial) Bankcard Assoc.	Transaction ID: D292276 Date of Disbursement
Mailing Address 15600 Wayzata Blvd. Ste. 101	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 3 / 2 0 1 0</div> </div>
City Wayzata State MN Zip Code 55391	Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card Processing Fees	<div> <div></div> <div>191.90</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) BCBS of Minnesota	Transaction ID: D292277 Date of Disbursement
Mailing Address P.O. Box 64676	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 2 4 / 2 0 1 0</div> </div>
City Saint Paul State MN Zip Code 55164	Amount of Each Disbursement this Period
Purpose of Disbursement Health Insurance	<div> <div></div> <div>1119.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) BCBS of Minnesota	Transaction ID: D292278 Date of Disbursement
Mailing Address P.O. Box 64676	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 7 / 2 0 1 0</div> </div>
City Saint Paul State MN Zip Code 55164	Amount of Each Disbursement this Period
Purpose of Disbursement Health Insurance	<div> <div></div> <div>1119.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

2429.90

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial) Budget Conferencing	Transaction ID: D292279 Date of Disbursement
Mailing Address PO Box 414634	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 2 6 / 2 0 1 0</div> </div>
City Boston State MA Zip Code 02125	Amount of Each Disbursement this Period
Purpose of Disbursement Telephone	<div> <div></div> <div>19.31</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Budget Conferencing	Transaction ID: D292280 Date of Disbursement
Mailing Address PO Box 414634	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 4 / 2 0 1 0</div> </div>
City Boston State MA Zip Code 02125	Amount of Each Disbursement this Period
Purpose of Disbursement Telephone	<div> <div></div> <div>34.85</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Capital Accounting Services	Transaction ID: D292281 Date of Disbursement
Mailing Address 4190 Vinewood Lane, Ste. 111-554	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 1 0</div> </div>
City Plymouth State MN Zip Code 55442	Amount of Each Disbursement this Period
Purpose of Disbursement Accounting & Compliance Services	<div> <div></div> <div>2500.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

2554.16

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)
Cooperative Print Solutions

Mailing Address PO Box 9438

City Minneapolis State MN Zip Code 55440

Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D292283

Date of Disbursement

12 / 28 / 2010

Amount of Each Disbursement this Period

1604.53

B.

Full Name (Last, First, Middle Initial)
Kris Dahl

Mailing Address 1615 Q St NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Administrative Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D292298

Date of Disbursement

12 / 08 / 2010

Amount of Each Disbursement this Period

600.00

C.

Full Name (Last, First, Middle Initial)
Dinah Dale Consulting, Inc.

Mailing Address 131 Burntside Drive

City Golden Valley State MN Zip Code 55422

Purpose of Disbursement
Consulting - Fundraising

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D292284

Date of Disbursement

12 / 01 / 2010

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional)

6204.53

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial) EFTPS - US Treasury Mailing Address P.O. Box 173788	Transaction ID: D292285 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 5 / 2 0 1 0</div> </div>
City State Zip Code Denver CO 80217 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>203.00</div>
B. Full Name (Last, First, Middle Initial) EFTPS - US Treasury Mailing Address P.O. Box 173788 City State Zip Code Denver CO 80217 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D292286 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>735.18</div>
C. Full Name (Last, First, Middle Initial) EFTPS - US Treasury Mailing Address P.O. Box 173788 City State Zip Code Denver CO 80217 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D292287 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 5 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>735.20</div>

SUBTOTAL of Disbursements This Page (optional)

1673.38

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial) EFTPS - US Treasury <hr/> Mailing Address P.O. Box 173788	Transaction ID: D292288 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 1 0</div> </div>
City State Zip Code Denver CO 80217 <hr/> Purpose of Disbursement Payroll Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>735.20</div>
B. Full Name (Last, First, Middle Initial) Jessi Held <hr/> Mailing Address 3808 Portland ave. S. <hr/> City State Zip Code Minneapolis MN 55407 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D292295 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>607.39</div>
C. Full Name (Last, First, Middle Initial) Jessi Held <hr/> Mailing Address 3808 Portland ave. S. <hr/> City State Zip Code Minneapolis MN 55407 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D292296 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 5 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>607.38</div>

SUBTOTAL of Disbursements This Page (optional) ►

1949.97

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial) Jessi Held	Transaction ID: D292297 Date of Disbursement
Mailing Address 3808 Portland ave. S.	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 1 0</div> </div>
City Minneapolis State MN Zip Code 55407	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>607.39</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Hudson Bay of Illinois	Transaction ID: D292289 Date of Disbursement
Mailing Address 11032 Vera Cruz Ave. N.	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 8 / 2 0 1 0</div> </div>
City Champlin State MN Zip Code 55316	Amount of Each Disbursement this Period
Purpose of Disbursement Fundraising Services	<div>2010.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Hudson Bay of Illinois	Transaction ID: D292290 Date of Disbursement
Mailing Address 11032 Vera Cruz Ave. N.	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 6 / 2 0 1 0</div> </div>
City Champlin State MN Zip Code 55316	Amount of Each Disbursement this Period
Purpose of Disbursement Fundraising Services	<div>1950.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

4567.39

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)
Hudson Bay of Illinois

Mailing Address 11032 Vera Cruz Ave. N.

City State Zip Code
Champlin MN 55316

Purpose of Disbursement
Fundraising Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D292291

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2687.31

B.

Full Name (Last, First, Middle Initial)
Merchant Services

Mailing Address 890 Mountain Ave.

City State Zip Code
New Providence NJ 07974

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D292254

Date of Disbursement

/ /

Amount of Each Disbursement this Period

126.35

C.

Full Name (Last, First, Middle Initial)
Meyer Associates

Mailing Address 14 No. Seventh Avenue

City State Zip Code
Saint Cloud MN 56303

Purpose of Disbursement
Email Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D292303

Date of Disbursement

/ /

Amount of Each Disbursement this Period

29.64

SUBTOTAL of Disbursements This Page (optional)

2843.30

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial)
Minnesota Democratic Farmer Labor Party

Mailing Address 255 E. Plato Blvd.

City Saint Paul State MN Zip Code 55107

Purpose of Disbursement
Rent

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D292304

Date of Disbursement

/ /

Amount of Each Disbursement this Period

800.00

B. Full Name (Last, First, Middle Initial)
MN Department of Revenue

Mailing Address Mail Station 1173

City Saint Paul State MN Zip Code 55146

Purpose of Disbursement
Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D292305

Date of Disbursement

/ /

Amount of Each Disbursement this Period

141.50

C. Full Name (Last, First, Middle Initial)
MN Department of Revenue

Mailing Address Mail Station 1173

City Saint Paul State MN Zip Code 55146

Purpose of Disbursement
Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D292306

Date of Disbursement

/ /

Amount of Each Disbursement this Period

141.50

SUBTOTAL of Disbursements This Page (optional)

1083.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial) MN Department of Revenue	Transaction ID: D292307 Date of Disbursement																				
Mailing Address Mail Station 1173	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	1	0												
City Saint Paul State MN Zip Code 55146	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Taxes Candidate Name	<table border="1"> <tr> <td colspan="10">141.50</td> </tr> </table>	141.50																			
141.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Mary C. Pardue	Transaction ID: D292299 Date of Disbursement																				
Mailing Address 2901 Knox Avenue S., #1	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Minneapolis State MN Zip Code 55408	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Candidate Name	<table border="1"> <tr> <td colspan="10">478.19</td> </tr> </table>	478.19																			
478.19																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Mary C. Pardue	Transaction ID: D292301 Date of Disbursement																				
Mailing Address 2901 Knox Avenue S., #1	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	5		2	0	1	0												
City Minneapolis State MN Zip Code 55408	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Candidate Name	<table border="1"> <tr> <td colspan="10">478.19</td> </tr> </table>	478.19																			
478.19																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1097.88

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)
Mary C. Pardue

Mailing Address 2901 Knox Avenue S., #1

City State Zip Code
Minneapolis MN 55408

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D292302

Date of Disbursement

12 / 31 / 2010

Amount of Each Disbursement this Period

478.18

B.

Full Name (Last, First, Middle Initial)
Paypal

Mailing Address 2211 North First Street

City State Zip Code
San Jose CA 95131

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D292312

Date of Disbursement

12 / 03 / 2010

Amount of Each Disbursement this Period

60.00

C.

Full Name (Last, First, Middle Initial)
Paypal

Mailing Address 2211 North First Street

City State Zip Code
San Jose CA 95131

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D292313

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

281.85

SUBTOTAL of Disbursements This Page (optional)

820.03

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 2211 North First Street</p> <p>City San Jose State CA Zip Code 95131</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D292314 Date of Disbursement <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 1 0</div> </p> <p>Amount of Each Disbursement this Period <div>5.00</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 2211 North First Street</p> <p>City San Jose State CA Zip Code 95131</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D292315 Date of Disbursement <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 1 0</div> </p> <p>Amount of Each Disbursement this Period <div>99.79</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Perkins Coie</p> <p>Mailing Address 1201 Third Ave., Ste. 4800</p> <p>City Seattle State WA Zip Code 98101</p> <p>Purpose of Disbursement Legal Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D292316 Date of Disbursement <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 6 / 2 0 1 0</div> </p> <p>Amount of Each Disbursement this Period <div>1930.10</div> </p>

SUBTOTAL of Disbursements This Page (optional)

2034.89

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial) UPS Mailing Address P.O. Box 650580	Transaction ID: D292319 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 8 / 2 0 1 0</div> </div>
City Dallas State TX Zip Code 75265 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>20.34</div>
B. Full Name (Last, First, Middle Initial) UPS Mailing Address P.O. Box 650580 City Dallas State TX Zip Code 75265 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D292320 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 6 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>1.22</div>
C. Full Name (Last, First, Middle Initial) US Postmaster Mailing Address 100 S. 1st Street City Minneapolis State MN Zip Code 55401 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D292317 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>1100.00</div>

SUBTOTAL of Disbursements This Page (optional)

1121.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 32 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) US Postmaster</p> <p>Mailing Address 100 S. 1st Street</p> <p>City Minneapolis State MN Zip Code 55401</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D292318</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1566.21"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Natalie Volin</p> <p>Mailing Address 67 Otis Avenue</p> <p>City Saint Paul State MN Zip Code 55104</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D292308</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1110.25"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Natalie Volin</p> <p>Mailing Address 67 Otis Avenue</p> <p>City Saint Paul State MN Zip Code 55104</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D292309</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1110.25"/></p>

SUBTOTAL of Disbursements This Page (optional)

3786.71

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)
Natalie Volin

Mailing Address 67 Otis Avenue

City State Zip Code
Saint Paul MN 55104

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D292310

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1110.25

B.

Full Name (Last, First, Middle Initial)
Well & Lighthouse, LLC

Mailing Address 1724 - 20th St. NW, Ste. 302

City State Zip Code
Washington DC 20009

Purpose of Disbursement
Web Site

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D292323

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2250.00

C.

Full Name (Last, First, Middle Initial)
Wells Fargo Bank, N.A.

Mailing Address P.O. Box B 514

City State Zip Code
Minneapolis MN 55479

Purpose of Disbursement
Bank Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D292324

Date of Disbursement

/ /

Amount of Each Disbursement this Period

31.50

SUBTOTAL of Disbursements This Page (optional)

3391.75

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial) Mary C. Pardue	Transaction ID: D292300 Date of Disbursement
Mailing Address 2901 Knox Avenue S., #1	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 2 / 2 0 1 0</div> </div>
City Minneapolis State MN Zip Code 55408	Amount of Each Disbursement this Period
Purpose of Disbursement Reimbursement	<div>50.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Natalie Volin	Transaction ID: D292311 Date of Disbursement
Mailing Address 67 Otis Avenue	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 1 0</div> </div>
City Saint Paul State MN Zip Code 55104	Amount of Each Disbursement this Period
Purpose of Disbursement Reimbursement-See Memo	<div>340.79</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Sprint	Transaction ID: D292326 Date of Disbursement
Mailing Address 6200 Sprint Pkway	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 1 0</div> </div>
City Overland Park State KS Zip Code 66251	Amount of Each Disbursement this Period
Purpose of Disbursement Telephone	<div>187.50</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

390.79

TOTAL This Period (last page this line number only)

47194.64

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial)
KLOBUCHAR FOR MINNESOTA 2012

Mailing Address PO BOX 4146

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
Contribution

Candidate Name
Amy J Klobuchar

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: D290793

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

B. Full Name (Last, First, Middle Initial)
WHITEHOUSE FOR SENATE

Mailing Address P.O. BOX 40280

City PROVIDENCE State RI Zip Code 02940

Purpose of Disbursement
Contribution

Candidate Name
Sheldon Whitehouse

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: RI District: 00

Transaction ID: D290794

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

10000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)
Bois Forte Political Education Fund

Mailing Address Box 141

City State Zip Code
Nett Lake MN 55771

Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D291550

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	2		2	0	1	0

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

1500.00